PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number			
	Effective December 8, 2004							10/562123			3	
	CLAIMS AS FILED - PART I							SMALL EN	TITY		OTHER	THAN
<u> </u>	 _		(Column 1)			(Column 2)	umn 2)			OR ~	SMALL	ENTITY
U.S. NATIONAL STAGE FEES			·					RATE	FEE		RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LAR	GE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	2710
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100		All other situations = \$ 100 / \$ 200			EXAM. FEE		1	EXAM. FEE	200
SEARCH FEE			U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		ALL other situations = \$ 250 / \$ 500			SEARCH FEE			SEARCH FEE	402
FEE FOR EXTRA SPEC. PGS:			minus 100 =		/ 50 =			X \$ 125 =		1	"X"\$ 250 =	
TOTAL CHARGEABLE CLAIMS			minus 20 =		*	1		X \$ 25 =		OR	X \$ 50 =	5%)
INDEPENDENT CLAIMS			2 minus 3 = .		*			X \$ 100 =		OR	X \$ 200 =	
MULTIPLE DEPENDENT CLAIM PRI			ESENT					+ \$ 180 =		OR	+ \$ 360 =	
* If	the difference	e in column 1 is	less than zer	ro, enter "C	" in co	olumn 2		TOTAL		OR	TOTAL	950
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						_	SMALL E	NTITY	OR	OTHER SMALL E		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
							-	TOTAL ADDIT. FFF		ÖR	TOTAL ADDIT. FFF	
		(Column 1)		(Colum	n 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ST JER USLY	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ſ	X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	ľ	X \$ 100 =	·	OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT.		OR	TOTAL ADDIT.	
**	If the "Highest Nu If the "Highest Nu	ımn 1 is less than the ımber Previously Pai ımber Previously Paid ınber Previously Paid	d For" IN THIS S d For" IN THIS S	PACE is less	than '20 than '3',)', enter "20". enter "3".	n the	appropriate box	in column 1.			

FORM PTO-875 (Rev. 02/2005)

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